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CONFIRMATION NO. 5750

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|---|---|---|------------------------|-------------------------------------|
| SERIAL NUMBER 10/714,211 | FILING OR 371(c) DATE 11/14/2003 RULE | CLASS 424 | GROUP ART UNIT 1632 | ATTORNEY DOCKET NO. NR 03-001 |
| APPLICANTS Joseph Edward Zahner, Saint Louis, MO; | | | | |
| ** CONTINUING DATA ***** This application is a CON of 09/919,298 07/31/2001 ABN which claims benefit of 60/254,551 12/12/2000 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 03/17/2004 | | | | |
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____ | STATE OR COUNTRY MO | SHEETS DRAWING 2 | TOTAL CLAIMS 19 |
| INDEPENDENT CLAIMS 3 | | | | |
| ADDRESS Joseph E. Zahner Suite C110 3556 Caroline Mall St. Louis, MO63104-1085 | | | | |
| TITLE In vitro-derived adult pluripotent stem cells and uses therefor | | | | |
| FILING FEE RECEIVED 385 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |